

Please type a plus sign (+) inside this box →



PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to the collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/508,552	
	Filing Date	June 12, 2000	
	First Named Inventor	Berzofsky, Jay A.	
	Group Art Unit	1648	
	Examiner Name	J. Stucker	
Total Number of Pages in This Submission	1	Attorney Docket Number	015280-368200US

RECEIVED

JUN 12 2002

TECH CENTER 1600/2900

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm and Individual name	Townsend and Townsend and Crew LLP	
	Brian W. Poor	Reg. No. 32,928
Signature	<i>Brian W. Poor</i>	
Date	May 23, 2002	

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <span style="border: 1px solid black; padding: 2px;">May 23, 2002</span>		
Typed or printed name	Wendy Walton	
Signature	<i>Wendy Walton</i>	Date May 23, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. SE 5012544 v1

<b>FEE TRANSMITTAL</b> <b>for FY 2001</b>		<b>Complete if Known</b>	
Patent fees are subject to annual adjustment.		<b>RECEIVED</b> JUN 12 2002	
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1,440		<b>TECH CENTER 1600/2900</b>	

<b>METHOD OF PAYMENT</b>		<b>3. ADDITIONAL FEES</b>		<b>FEE CALCULATION (continued)</b>	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP <input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Large Fee Code, Entity Fee (\$), Small Fee Code, Entity Fee (\$), Fee Description, Fee Paid		Fee Paid	
2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other		105 130 205 65 Surcharge - late filing fee or oath 127 50 227 25 Surcharge - late provisional filing fee or cover sheet. 139 130 139 130 Non-English specification 147 2,520 147 2,520 For filing a request for reexamination 112 920* 112 920* Requesting publication of SIR prior to Examiner action 113 1,840* 113 1,840* Requesting publication of SIR after Examiner action 115 110 215 55 Extension for reply within first month 116 400 216 200 Extension for reply within second month 117 920 217 460 Extension for reply within third month 118 1,440 218 720 Extension for reply within fourth month 128 1,960 228 980 Extension for reply within fifth month 119 320 219 160 Notice of Appeal 120 320 220 160 Filing a brief in support of an appeal 121 280 221 140 Request for oral hearing 138 1,510 138 1,510 Petition to institute a public use proceeding 140 110 240 55 Petition to revive - unavoidable 141 1,280 241 640 Petition to revive - unintentional 142 1,280 242 640 Utility issue fee (or reissue) 143 460 243 230 Design issue fee 144 620 244 310 Plant issue fee 122 130 122 130 Petitions to the Commissioner 123 50 123 50 Petitions related to provisional applications 126 180 126 180 Submission of Information Disclosure Sheet 581 40 581 40 Recording each patent assignment per property (times number of properties) 148 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a)) 149 740 249 370 For each additional invention to be examined (37 CFR § 1.129(b)) 179 740 279 370 Request for Continued Examination (RCE) 169 900 169 900 Request for expedited examination of a design application		1,440	
<b>BASIC FILING FEE</b>		<b>Other fee (specify)</b>		<b>SubTOTAL (3)</b> (\$1,440)	
Large Fee Code, Entity Fee (\$), Small Fee Code, Entity Fee (\$), Fee Description, Fee Paid		The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.			
101 740 201 370 Utility filing fee 106 330 206 165 Design filing fee 107 510 207 255 Plant filing fee 108 740 208 370 Reissue filing fee 114 160 214 80 Provisional filing fee					
<b>SubTOTAL (1)</b> (\$)					
2. <b>EXTRA CLAIM FEES</b> Total Claims: 20** = Extra Claims: X = Fee from below: X = Fee Paid: Independent Claims: 3** = X = Multiple Dependent: X = Large Fee Code, Entity Fee (\$), Small Fee Code, Entity Fee (\$), Fee Description, Fee Paid					
103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 ** Reissue independent claims over original patent 110 18 210 9 ** Reissue claims in excess of 20 and over original patent					
<b>SubTOTAL (2)</b> (\$)					

\*for number previously paid, if greater; For Reissues, see above

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	Brian W. Poor	Registration No. (Attorney/Agent)	32,928
Signature	<i>Brian W. Poor</i>	Telephone	208-467-9800
		Date	May 23, 2002

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. SE 5012545 v1